



Commonwealth  
of Massachusetts

Center for Health  
Information and Analysis

# All Payer Claims Database Data Volume Reports

## 2008 - 2012

### March 2013

The Commonwealth of Massachusetts established an All Payer Claims Database (APCD) in 2010 as one of the largest data collection efforts undertaken by the state. Regulation 114.5 CMR 21.00, Health Care Payer Claims Data Submissions, requires health insurance payers to submit medical, pharmacy, and dental claims, as well as information about member eligibility, benefit design, and providers to the Center for Health Information and Analysis (CHIA) for Massachusetts residents. The goals of the APCD are to provide administrative simplification to payers and to provide access to timely, accurate, and relevant data for improving quality, mitigating costs, and promoting transparency in the health care delivery system.

The charts below depict the number of records submitted to the Center as of December 2012 by health insurance payers. These Data Volume Reports are a concise way of presenting the amount of APCD data collected by year and file type.

Please feel free to submit any questions related to the reports to the Center's APCD mailbox: [CHIA-APCD@state.ma.us](mailto:CHIA-APCD@state.ma.us).

Thank you for your interest in the All Payer Claims Database.

Commonwealth of Massachusetts-Center for Health Information and Analysis (CHIA)  
APCD Data Volume Reports 2008-2012 (based on data received by 12/19/2012)

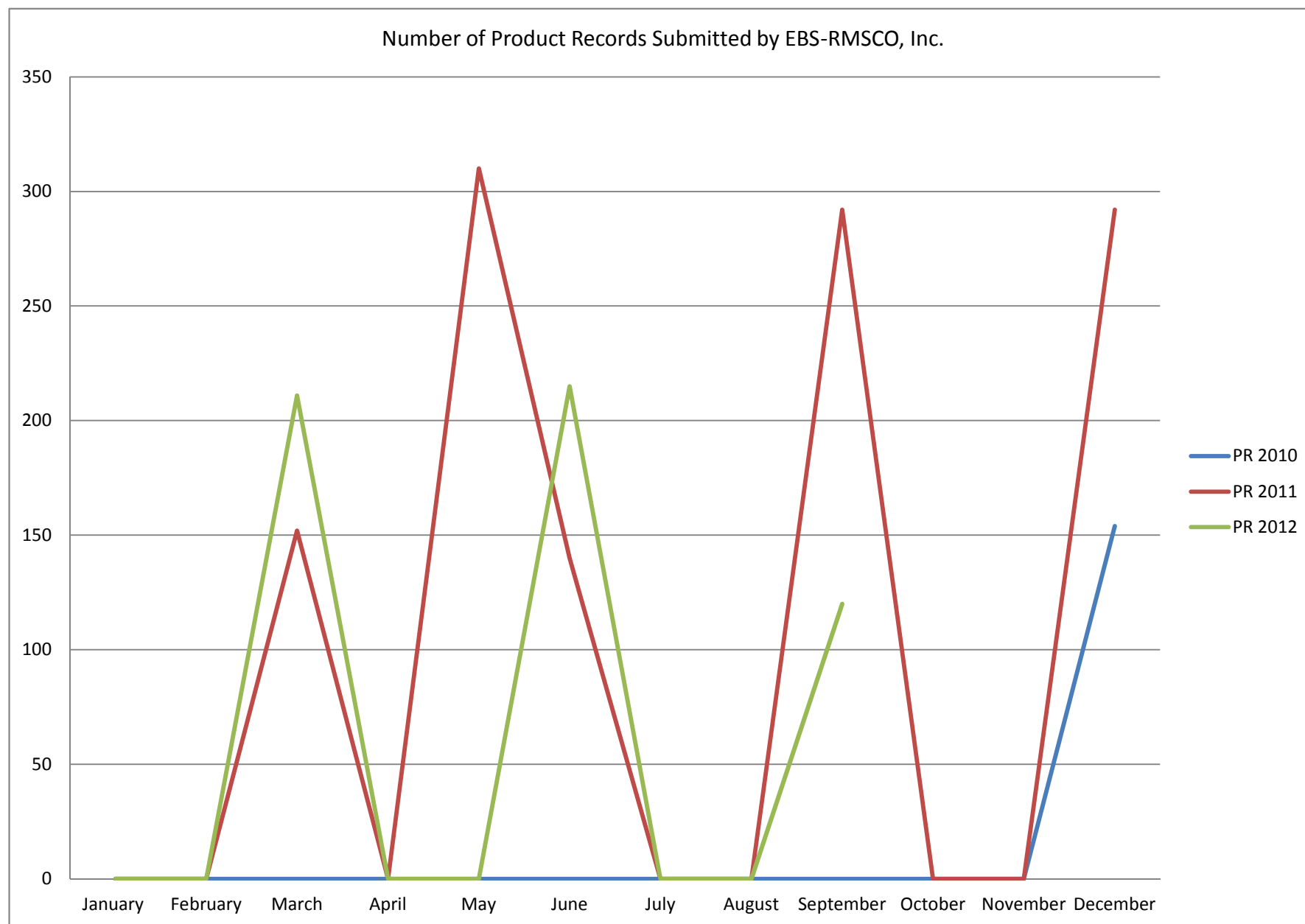
EBS-RMSCO, Inc.														
File Type*	Submission Year	January	February	March	April	May	June	July	August	September	October	November	December	Total
PR	2010	0	0	0	0	0	0	0	0	0	0	0	154	154
PR	2011	0	0	152	0	310	140	0	0	292	0	0	292	1186
PR	2012	0	0	211	0	0	215	0	0	120				546
ME	2009	0	0	0	0	0	0	0	0	0	0	0	8,156	8156
ME	2010	0	0	0	0	0	0	0	0	0	0	0	6,480	6480
ME	2011	6,378	6,326	6,205	6,164	6,105	5,360	5,292	3,907	4,033	4,073	4,120	3,990	61,953
ME	2012	3,938	3,900	3,912	3,959	3,894	3,850	3,768	3,796	3,887	3,824	3,830		42,558
PV	2011	1,507	1,329	1,651	1,348	18,198	1,586	1,341	601	527	525	576	494	29,683
PV	2012	551	510	449	433	467	41	351	409	319	370			3900
MC	2008	133	77	97	215	134	67	86	108	304	183	227	249	1880
MC	2009	208	216	359	286	282	350	297	339	351	283	291	423	3685
MC	2010	347	581	550	498	624	710	479	407	349	471	444	371	5831
MC	2011	419	328	166	92	87	78	31	1,688	1,269	1,285	1,357	1,193	7993
MC	2012	1,574	1,031	771	692	136	400	683	534	483	586	385		7,275
PC	2008	27	24	14	94	10	71	40	7	7	57	31	22	404
PC	2009	4	52	131	60	191	182	47	28	15	27	32	35	804
PC	2010	21	4	19	32	31	28	11	38	15	11	70	11	291
PC	2011	10	2	12	5	2	83	3	73	73	55	46	62	426
PC	2012	108	14	52	68	3	37	36	75	280	410	172		1255
DC	2008	327	259	363	718	964	999	1,230	1,126	1,102	1,219	1,043	1,323	10673
DC	2009	816	710	983	925	692	714	641	644	469	414	372	532	7912
DC	2010	406	362	377	337	303	300	211	271	240	238	219	235	3499
DC	2011	109	126	129	100	94	83	6	515	378	364	440	326	2670
DC	2012	812	142	334	332	74	221	192	278	168	355	270		3178

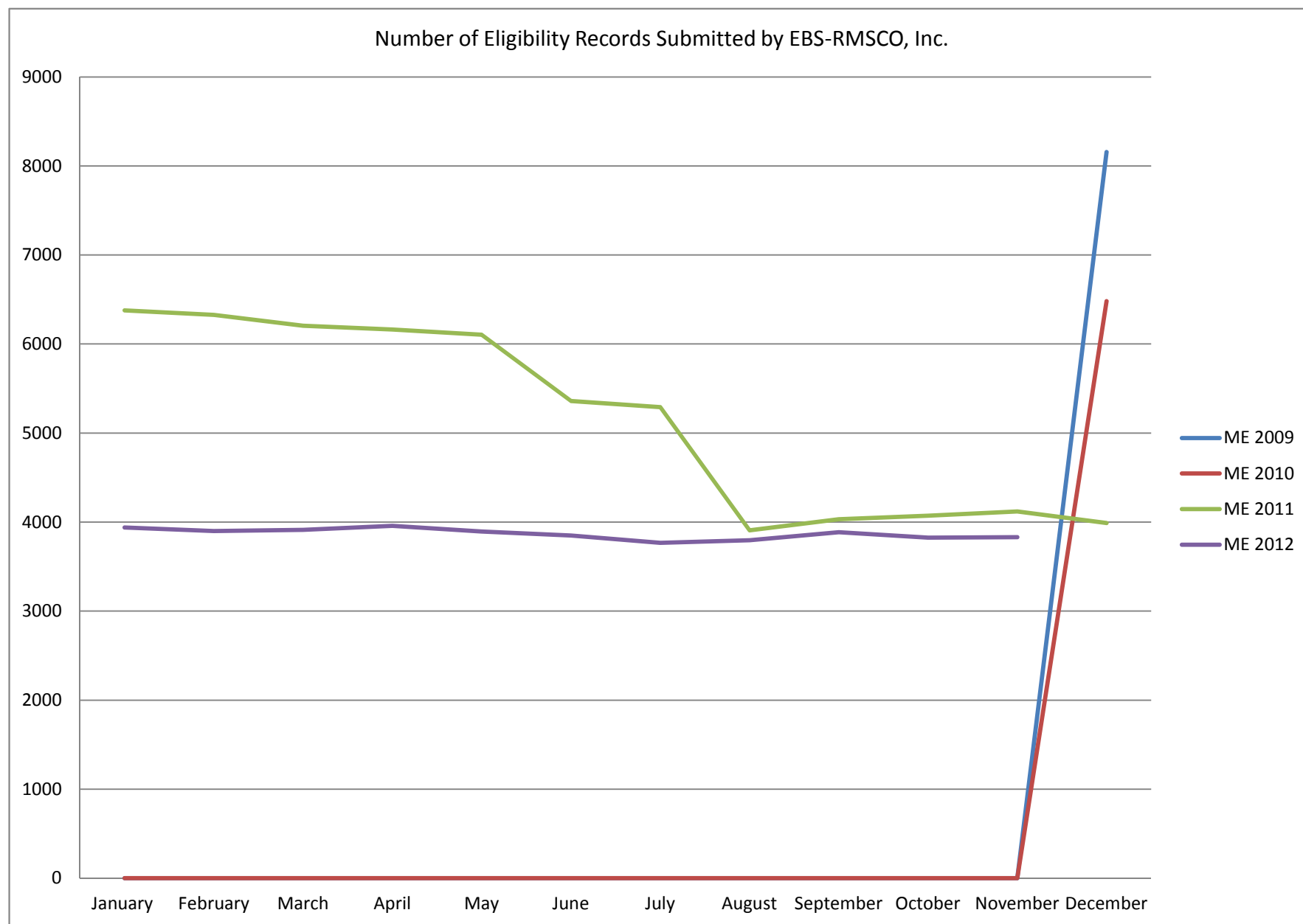
**\*Key:** PR=Product Records; ME=Member Eligibility Records; PV=Provider Records; MC=Medical Claim Lines; PC=Pharmacy Claim Lines; and DC=Dental Claim Lines.

**The Volume Report presents the APCD inventory as of December 2012 and reflects the related compliance requirements:**

- Medical, pharmacy, and dental submissions are required monthly beginning January 2008.
- Provider submissions are required monthly beginning January 2011. The May 2011 submission contains historical records from 2008 through May 2011.
- Product submissions are required quarterly beginning December 2010. The May 2011 submission contains historical records from 2008 through 2010 plus 2011, quarter one.
- Member eligibility submissions are required monthly beginning in January 2011. Prior to 2011, payers were required to submit two eligibility files: a December 2009 eligibility submission covering calendar years 2008 and 2009, and a December 2010 eligibility submission covering calendar years 2009 and 2010. Eligibility files contain data for twenty-four months of member eligibility.
- The APCD liaisons monitor and enforce compliance rules and authorize exceptions. Some carriers have incomplete data due to: exemptions from filing, limited claim or member base, phasing into APCD and are currently in testing or ramping up their production data filings, are in the process of updating specific submissions, and/or non-compliance.

**These numbers represent the number of records submitted, not actual counts of members, providers, products or claims.**





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